PTO/SB/06 (07-06)

Approved for use through 1/31/2007. OMB 0651-0032 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

-				a collection of information unless it displays a valid OMB control number oplication or Docket Number Filing Date								
PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 09/915,091			25/2001	To be Mailed	
APPLICATION AS FILED – PART I										OTHER THAN		
(Column 1)				I) ((Column 2)			ENTITY	OR	SMA	LL ENTITY	
FOR			NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
BASIC FEE (37 CFR 1.16(a), (b), or (c))			N/A		N/A		N/A			N/A		
(37 CFR 1.16(k), (i), or (m))			N/A		N/A		N/A			N/A		
EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))			N/A		N/A		N/A			N/A		
TOTAL CLAIMS (37 CFR 1.16(i))			minus 20 =		•		× \$ =		OR	x s =		
INDEPENDENT CLAIMS (37 CFR 1.16(h))			minus 3 =		•		× \$ =			× \$ =		
(PPLICATION SIZE 37 CFR 1.16(s))	FEE is \$2 add 35 U	ets of pap 250 (\$125 tional 50 J.S.C. 41(ation and drawin er, the applicatio for small entity) sheets or fraction a)(1)(G) and 37	n size fee due for each n thereof. See							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))						1						
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL			TOTAL		
APPLICATION AS AMENDED – PART II (Column 1) (Column 2) (Column 3)							SMAL	OTHER THAN SMALL ENTITY OR SMALL ENTITY				
AMENDMENT	05/12/2010	CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR	AMENDMENT	Minus	PAID FOR ** 32	= 0	1	X\$ =		OR	X \$52=	0	
	1.16(i)) Independent (37 CFR 1.16(h))	• 1	Minus	3	= 0	1	× \$ =		OR	X \$220=	0	
	Application Size Fee (37 CFR 1.16(s))											
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
•							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
(Column 1) (Column 2) (Column 3)												
_		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
EN.	Total (37 CFR 1,16())	*	Minus	**	-		× \$ =		OR	x \$ =		
AMENDMENT	Independent (37 CFR 1 16(h))	•	Minus	***	-		X\$ =		OR	X\$ =		
N N N	Application Size Fee (37 CFR 1.16(s))											
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16()))								OR			
									OR	TOTAL ADD'L FEE		
* If the entry in column 1 is less than the entry in column 3, write '0' in column 3. Legal Instrument Examiner: ///MBERLY PANNELL/ ///MBERLY PANNELL/ ///MBERLY PANNELL/ ////MBERLY PANNELL/ ////////////////////////////////												
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to												

This collection of information is required by 37 CFR 1.15. The information is required to obtain or retain a benefit by the public which is to life (and by the USF100 process) an application. Confidentiality is governed by 35 USA. C12 and 37 CFR 1.4.1. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USF10. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete listiform and/or suggestors for reducing this burden, should be sent to the CHIM formation. U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandra IVA 22313-1450, DD KOT SEND FEES OF COMPLETED FORMS TO THIS ADDRESS. SERUM To 10: Commission Advection that the USF10. DE NOT SEND FEES OF COMPLETED FORMS TO THIS ADDRESS. SERUM TO: Commission Advection that the USF10. DE NOT SEND FEES OF COMPLETED FORMS TO THIS ADDRESS. SERUM 50: Commission Advection that the USF10. DE NOT SEND FEES OF COMPLETED FORMS TO THIS ADDRESS. SERUM 50: Commission Advection that the USF10. DE NOT SEND FEES OF COMPLETED FORMS TO THIS ADDRESS. SERUM 50: Commission Advection that the USF10. DE NOT SEND FEES OF COMPLETED FORMS TO THIS ADDRESS. SERUM 50: Commission Advection that the USF10. DE NOT SEND FEES OF COMPLETED FORMS TO THIS ADDRESS. SERUM 50: Commission Advection that the USF10. DE NOT SEND FEES OF COMPLETED FORMS TO THIS ADDRESS. SERUM 50: Commission Advection that the USF10. DE NOT SEND FEES OF COMPLETED FORMS TO THIS ADDRESS. SERUM 50: Commission Advection that the USF10. DE NOT SEND FEES OF COMPLETED FORMS TO THIS ADDRESS. SERUM 50: Commission Address a

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.